



UTAH CATTLE HEALTH ASSURANCE PROGRAM (UCHAP)

APPLICATION

The Utah Cattle Health Assurance Program is an integrated herd management approach to the detection, control and eradication of diseases within the herd. The program is built around a flexible core composed of management procedures, informed culling decisions and diagnostic surveillance.

A:

Herd Owner: _____ Farm Name: _____

Address: _____

Global Positioning System (list coordinates): _____

Location: County _____ Town _____

Phone number (area code): _____ Fax number: _____

E-mail Address: _____

B:

Herd Veterinarian: _____

Representing (veterinary practice/clinic): _____

Address: _____

_____ Phone Number: _____

Fax number: _____ E-mail Address: _____

C:

Utah Department of Agriculture and Food, Division of Animal Industry

Address: P.O. Box 146500, Salt Lake City, Utah 84114-6500

Location: 350 North Redwood Road

Telephone number: (801) 538-4910

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CORE MODULE

The parties agree to cooperate in a program to control diseases in this herd of cattle located at:

Premise: _____ Location: _____

The parties agree as follows:

A. The herd owner agrees to

- Identify all animals in herd of participation.
- Perform a Risk Assessment in conjunction with the herd veterinarian.
- In conjunction with the herd veterinarian, establish a written herd plan designed and tailored to control diseases on the farm and produce a more consistent and safe food product. The herd plan should be developed using tenets of the best management practices as a guideline.
- Implement herd plan as developed.
- Notify herd veterinarian of problems and adjust herd plan as necessary.
- Participate in an annual review with the herd veterinarian to demonstrate implementation of the herd plan.

B. The herd veterinarian agrees to

- Perform a Risk Assessment in conjunction with the herd owner or representative.
- Establish, in cooperation with the producer, the herd plan tailored to reduce or eliminate disease on the particular farm. Utilize the “Best Management Practices” as a template for the establishment of the herd plan.
- Insure that all animals are identified.
- Collect and submit diagnostic samples described in the herd plan or as needed.
- Participate in an annual review of the herd plan with the herd owner and monitor progress of plan on his regularly scheduled visits.

C. The Department of Agriculture and Food agrees to

- Become the “Certifying Agency” for the program. Approve the use of the UCHAP logo by participating farms and issue a Certificate of Participation.
- Provide information about diseases and methods of control to the herd owner and the herd veterinarian.
- Assist with the interpretation of diagnostic test results.

JOHNE'S MODULE

The parties agree to cooperate in a program to control JOHNE'S DISEASE in this herd of cattle located at:

Premise: _____ Location: _____

A. The herd owner agrees to:

- Randomly test 30 cows from the herd which have had at least 2 calves
- Identify all animals in herd of participation
- Implement Best Management Practices to control Johne's Disease on the premise

B. The veterinarian agrees to:

- Collect random samples from 30 cows in the herd which have had at least 2 calves. (Veterinary fees for this service shall be negotiated between the veterinarian and the herd owner)
- Consult with the herd owner concerning Best Management Practices to control Johne's Disease in the herd

C. The Department of Agriculture and Food agrees to:

- Provide 30 blood collection tubes to the program participant's veterinarian
- Reimburse the U.S.U. Veterinary Diagnostic Laboratory the amount of \$5 per ELISA test up to a maximum of 30 animals per herd. (Reimbursement and tubes shall be limited to funding granted by the legislature to the Department for that purpose.)

D. All Parties understand and agree that

- Prerequisites for entering into this agreement have been met.
- There will be no compensation or money paid to the Herd Owner for removal of cattle that are clinical cases and/or are test positive by serology or culture for infection.
- The department shall have no liability for damages, losses, or injuries incidental to or arising out of handling or use of the vaccine on the animals or other work performed under this agreement.
- Cancellation of agreement:
 1. Herd owner may cancel at any time for any reason.
 2. Herd Veterinarians may cancel at any time for any reason but the Herd Owner may apply for a new agreement.
 3. The Department may cancel at any time if the owner fails to demonstrate compliance with the herd plan.
- This program is voluntary and is not for regulatory purposes.

E. Confidentiality Statement –

Records relating to diagnostic testing shall be the property of the herd owner and shall be treated confidentially by UCHAP. Patient, Client, Veterinary relationship is recognized at all times with this program.

- ☐ **Yes, I would like to participate in the Core Module.**
- ☐ **Yes, I would like to participate in the Johne's Disease Module.**

This agreement is not effective until signed by all of the parties.

Herd Owner: _____ Date: _____

Herd Veterinarian: _____ Date: _____

Administrator: _____ Date: _____
Division of Animal Industry, UCHAP

**UCHAP gives thanks to the New York State Department of Agriculture and Markets and Cornell University for their resources used in this program.